

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

In re:

LEHMAN BROTHERS HOLDINGS INC

Lehman Brothers Holdings, Inc

("the Debtors")

Chapter 11

Case No. 08-13555 (JMP) Jointly  
Administered

Case No. 08-13555

Claim No.: 3649

**NOTICE OF TRANSFER OF CLAIM PURSUANT TO F.R.B.P. RULE 3001 (E)(2) FOR FILED  
CREDITOR, SMOLANSKY FUND LIMITED, IN THE AMOUNT OF \$622,082.00, TO C.V.I G.V.F.  
(LUX) MASTER S.A.R.L.**

**To Transferor:**

Smolansky Fund Limited  
c/o Prime Brokerage & Trading, Man  
Inves, Lower Thames Street  
Attention: Kirsten Rogers  
London, EC3R 6DU  
United Kingdom

PLEASE TAKE NOTICE that the transfer of \$622,082.00 of the above-captioned general unsecured claim has been transferred to:

**Transferee:**

C.V.I G.V.F. (Lux) Master S.a.r.l.  
c/o CarVal Investors UK Limited  
Knowle Hill Park  
Farimile Lane  
Cobham  
Surrey KT11 2PD  
United Kingdom

The evidence of transfer of claim is attached hereto. A copy of the Proof of Claim and a copy of the Claims Agent website listing the claim are attached.

If your objection is not timely filed, the transferee will be substituted in your place as the claimant on our records in this proceeding.

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(FOR CLERK'S OFFICE USE ONLY):

This notice was mailed to the first named party, by first class mail, postage prepaid on \_\_\_\_\_, 2009.

INTERNAL CONTROL NO. \_\_\_\_\_

Copy: (check) Claims Agent ☐ Transferee ☐ Debtors's Attorney ☐

\_\_\_\_\_  
Deputy Clerk

UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK

In re:

Ch-11 LEHMAN BROTHERS HOLDINGS,  
INC.

Debtor

Case No. 08-13555

Chapter 11

**NOTICE OF TRANSFER OF CLAIM  
PURSUANT TO RULE 3001(e)**

PLEASE TAKE NOTICE that any and all claims of Smolansky Fund Limited ("Assignor") that are scheduled by the Debtor(s) and or filed as an original or amended Proof of Claim against the Debtor(s), including but not limited to the following:

Proof of Claim Amount	Proof of Claim No.
\$622,082.00	3649

have been transferred and assigned to C.V.I. G.V.F. (Lux) Master S.a.r.l. ("Assignee"). The signature of Assignor on this document is evidence of the transfer of the claims and all rights thereto.


Assignor hereby waives any notice or hearing requirements imposed by Rule 3001 of the Bankruptcy Rules, and stipulates that an order may be entered recognizing this Assignment as an unconditional assignment and the Assignee herein as the valid owner of the Claim. You are hereby requested to make all future payments and distributions, and to give all notices and other communications, in respect of the Claim to the Assignee.

ASSIGNEE: C.V.I. G.V.F. (Lux) Master S.a.r.l.

Address: c/o CarVal Investors UK Limited  
Knowle Hill Park  
Fairmile Lane  
Cobham  
Surrey KT11 2PD

United Kingdom

BY CARVAL INVESTORS UK LIMITED

Signature: 

Name:

Title:

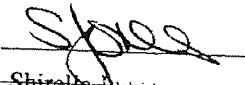
Date:

DAVID SHORT

OPERATIONS MANAGER

ASSIGNOR: Smolansky Fund Limited

Address: c/o Prime Brokerage & Trading, Man  
Inves, Lower Thames Street  
Attention: Kirsten Rogers  
London, EC3R 6DU  
United Kingdom

Signature: 

Name:


Title:

Date:

Shirelle Jones

Alternate Director

B 10 (Official Form 10) (12/07)

<b>UNITED STATES BANKRUPTCY COURT</b> Southern District of New York		<b>PROOF OF CLAIM</b>
Name of Debtor: <b>LEHMAN BROTHERS HOLDINGS INC.</b>		Case Number: <b>03/13555</b>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>SMOLANSKY FUND LIMITED</b>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  <b>Court Claim Number:</b> (If known)  <b>Filed on:</b>
Name and address where notices should be sent: <b>SMOLANSKY FUND LIMITED c/o Prime Brokerage and Trading, Man Investments Limited, Sugar Quay, Lower Thames Street, EC3R6DU. Attention: Kirsten Rogers: +44 2071443239</b>  Telephone number:		
Name and address where payment should be sent (if different from above): <b>Bank: Citibank, New York, ABA No: 021-000-089, Agent Swift: CITIUS33, Account Name: Citibank N.A. London, Account No: 10990765, Swift: CITIGB2L, FCC: Smolansky Fund Limited</b>  Telephone number:		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
1. Amount of Claim as of Date Case Filed: \$ <b>622082</b>  If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.  If all or part of your claim is entitled to priority, complete item 5.  <input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.  Specify the priority of the claim.  <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).  <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. § 507 (a)(4).  <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).  <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).  <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).  <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)
2. Basis for Claim: <b>ISDA Guarantee Claim</b> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor:		
3a. Debtor may have scheduled account as: (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.  Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:  Value of Property: \$                      Annual Interest Rate: %  Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$                      Basis for perfection:		
Amount of Secured Claim: \$                      Amount Unsecured: \$		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of orders, invoices, itemized statements. You may also attach a summary. Attach a security interest. You may also attach the claim, such as promissory notes, purchase security agreements, perfection of (side.)  Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 08-13555 (JMP)                      0000003649   ROYED AFTER  DO NOT SEND ORIGINAL DOCUMENTS FOR SCANNING.  If the documents are not available, please explain		
Date: <b>March 30, 2009</b>  Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.  <b>Shirelle Jones</b> <b>Alternate Director</b>		Amount entitled to priority:  *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to taxes commenced on or after the date of adjustment.
		FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

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## Lehman Brothers Holdings Inc. (Chapter 11)

Filed Claims and Schedules						
Claim #	3649	Name Starts With			Debtor	<input type="text"/>
Schedule #		Total Claim Value	Equals		Scope	Claims and Schedules
Claim Date Range				to		
Order By	Creditor Name		Results Per Page		10	<input type="button" value="Search"/> <input type="button" value="Clear"/>
<div>Page 1 of 1</div> <div>Page <input type="text"/> Go <input type="button" value="Go"/></div>						
+	Claim #	Schedule #	Creditor Name	Date	Total Claim Value	
-	3649		SMOLANSKY FUND LIMITED C/O PRIME BROKERAGE & TRADING, MAN INVES LOWER THAMES STREET ATTENTION: KIRSTEN ROGERS LONDON, EC3R6DU UNITED KINGDOM  Debtor: LEHMAN BROTHERS HOLDINGS, INC.	3/31/2009	\$622,082.00 Claim Unsecured Amount: \$622,082.00	<a href="#">Image</a>
Claims 1-1 of 1						

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